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0010/PTO  
Rev. 6/95

U.S. Department of Commerce  
Patent and Trademark Office

## DECLARATION

Declaration Submitted with Initial Filing      OR     Declaration Submitted After Initial Filing

Attorney Docket Number

First Named Inventor

**COMPLETE IF KNOWN**

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### Sterilisable Composite Film

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)  as PCT International Application

Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § .56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?
1114/99	Switzerland	06.15.1999	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/>	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

# DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations 1.56 which became available between the filing date of the prior application and the national or PCT filing date of this application.

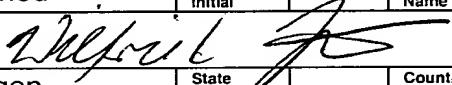
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name	<b>Fisher, Christen &amp; Sabol</b>		Payor Number (if applicable)	<input type="text"/>
Name	Registration Number		Name	Registration Number
Virgil H. Marsh Kara M. Armstrong	23,083 38,234			
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.				

<input type="checkbox"/> Please direct all correspondence to:	Name	Virgil H. Marsh	
Address	Fisher, Christen & Sabol		
Address	Suite 1401, 1725 K Street, N.W.		
City	Washington	State	D.C.
Country	USA	Telephone	(202)659-2000
Country		Fax	(202)659-2015
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			

Name of Sole or First Inventor:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Wilfried	Middle Initial		Family Name	Jud	Suffix			
Inventor's Signature						Date	02/04/00		
Residence: City	Singen	State		Country	Germany	Citizenship	German		
Post Office Address: Conradin-Kreutzer-Str. 2, D-78224 Singen, Germany									
City	Singen	State		Zip	78224	Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								

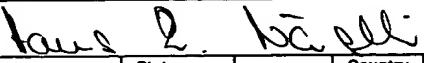
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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

#### Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Hans-Rudolf	Middle Initial		Family Name	Nägeli	Suffix	
Inventor's Signature					Date	02/04/00	
Residence: City	Neuhausen	State		Country	Switzerland	Citizenship	Swiss

Post Office Address:

Hohfluhrstr. 10, CH-8212 Neuhausen, Switzerland

City	Neuhausen	State		Zip	8212	Country	Switzerl.	Applicant Authority	
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#### Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	

Post Office Address:

City		State		Zip		Country		Applicant Authority	
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A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	

Post Office Address:

City		State		Zip		Country		Applicant Authority	
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#### Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	

Post Office Address:

City		State		Zip		Country		Applicant Authority	
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Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	

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Given Name		Middle Initial		Family Name		Suffix	
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Residence: City		State		Country		Citizenship	

Post Office Address:

City		State		Zip		Country		Applicant Authority	
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